




# *Provider Profile* **Report Card**

## **Consumer Survey Results of Treatment for Children and Adolescents who are Seriously Emotionally Disturbed**

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Indiana Family and Social Services Administration  
Division of Mental Health and Addiction  
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## Introduction

### *Why do you have a Provider Report Card?*

The purpose of this Hoosier Assurance Plan Provider Report Card is to organize and publish information on public mental health services for consumers and their family members. It is hoped that the information presented here will help the residents of Indiana choose mental health services that meet their needs.

### *What is a Managed Care Provider (MCP)?*

The Division of Mental Health (DMH) contracts with 20 mental health service agencies that receive managed care funding. The 20 agencies are called Managed Care Providers (MCP). Obviously, there are many more mental health service agencies out there but they do not receive managed care funding through DMH. By Indiana law, all 20 providers offer the same core set of ten mental health services called the “continuum of care.” (☞ **Hint:** find a list of all the services in the continuum of care in the glossary.) However, each MCP is different and does things differently. All have their strengths and weaknesses.

### *Who do these Managed Care Providers serve?*

The three populations that will be focused on by these report cards are (1) adults with serious mental illness, (2) children and adolescents with serious emotional disorders and (3) persons with chronic addictions or substance abuse. (☞ **Hint:** look in the glossary for definitions of these populations.) Not all providers serve all these populations. For example, some providers may serve only children and adolescents and some may only serve persons with addictions. This report card focuses on the MCPs that serve children and adolescents with serious emotional disorders.

### *Where did you get this information?*

We got the information in three ways. *One* way is by having each mental care provider fill out a survey about the services they offer. A *second*

way is through calling over 3,000 consumers of mental health and addiction services and asking their opinions about the services they receive. A *third* way is through the Hoosier Assurance Plan Assessment Instrument outcomes. Briefly, the Hoosier Assurance Plan Assessment Instrument is an assessment completed by clinicians in an effort to determine if a consumer is eligible for managed care funding through DMH. One thing the assessment instrument scores is how well the consumer is functioning in his or her life. The outcomes that we publish in the report card are the changes in scoring over time.

### *What's new this year?*

This is our fifth year of publishing the report card. This year we will have a total of seven report cards. Each report card will focus on one of three topics for each population. The first report card topic will be the results from the provider survey. The second report card topic will be the results from the consumer telephone survey. The third report card subject will be the outcomes from the Hoosier Assurance Plan Assessment Instruments. The report cards are broken down as follows:

1. The provider survey results for services for adults with serious mental illness.
2. The provider survey results for services for children and adolescents with serious emotional disorders.
3. The provider survey results for services for persons with chronic addictions.
4. The consumer telephone survey results for services for adults with serious mental illness.
5. The consumer telephone survey results for services for children and adolescents with serious emotional disorders. (☞ **This is the report card you are reading.**)
6. The Hoosier Assurance Plan Assessment Instrument outcomes for adults with serious mental illness.
7. The Hoosier Assurance Plan Assessment Instrument outcomes for persons with chronic addictions.

## How do I read this Report Card?

This report card displays the information we received from a telephone survey of consumers. A sample of consumers who were in service the previous year are telephoned. This report card is based on telephone calls made in State Fiscal Year (SFY) 2000 (July 1, 1999 to June 30, 2000). They were made to people in service during SFY 1999 (July 1, 1998 to June 30, 1999). On average, each call lasted 18 minutes.

### Tell me about the provider pages

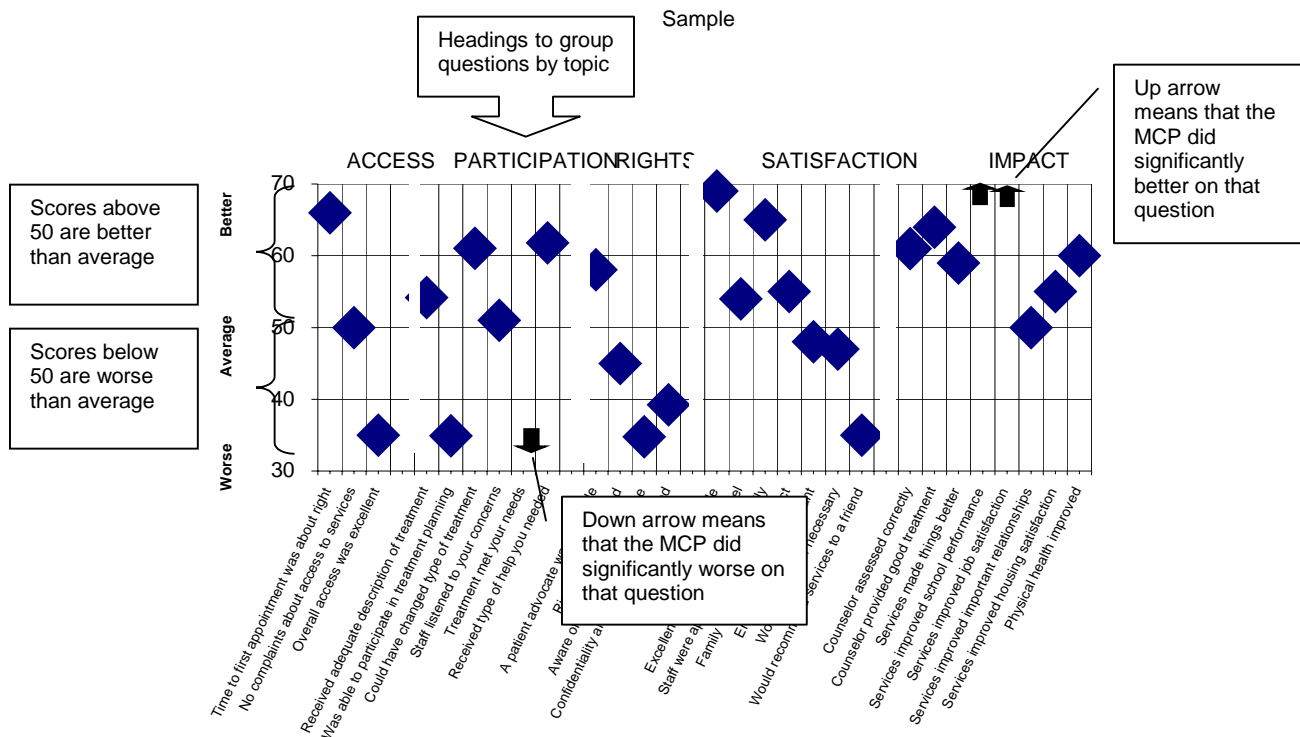
Each provider has one page that summarizes the results of the survey. These results are displayed through a graph that helps compare the MCPs to each other. A provider that did better than the others would be above the average of 50%.

### Tell me about the graphs on the provider pages

Each provider has a graph that shows how they compare to other providers in certain categories. The scores are shown in what is called a "T" score. Everything is based on an average. The graph shows the middle, marked with a "50", as the average of all the providers on each particular category. If the dot is above the "50" line, then the provider is "better than average." If the dot is below the "50" line, then the provider is "worse than average." (Reminder: this scale compares providers and does not rank them.)

Where an agency is very good or very poor, an arrow shows that their score is "off the graph".

The graphs have 26 items, each relating to a question or series of questions on the telephone survey. To make them easier to understand and read, the items are divided into five groups of questions: Access, Participation, Rights, Satisfaction, and Impact.



## *Tell me about the people who responded to the survey*

In this survey, which focuses on services for children and adolescents who suffer with serious emotional disturbances, “family members” were the survey respondents. The term family member is used throughout the report; however, in many cases the respondent was a Division of Family and Children Services caseworker. In the consumer surveys which focus on adults, the consumers themselves are the survey respondents.

Overall, MCP evaluation changes are improved over last year on the telephone survey. On six out of 26 questions (23%), the average response for all providers rose 2% or more this year, and the highest rating for each question improved by 5% or more this year in eight of 26 questions. Further, on only two of the questions did the average response fall by 2% or more. The lowest provider average rating improved 5% or more for seven of the questions but fell 5% or more for eight. (Changes in average scores of more than 2% up or down, and changes in maximum or minimum scores of more than 5% up or down are described in the narratives for each survey question below.) Overall, these changes suggest that while overall satisfaction and the highest-rated providers rose somewhat, the reports of dissatisfaction among specific providers did not produce an improvement in the aggregate – those with improved low scores were matched by those with worse low scores.

## **Access**

For services to do any good, people need to be able to get to them. Three scores are given on Access.

### *Time to first appointment was about right*

Consumers were asked about the time it took to get a first appointment. Their options were “too long,” “too short,” and “the right amount of time.” The report card looks at the proportion of consumers answering positively, or “the right amount of time.”

The average percent of positive answers was 81.1%, similar to last year.

## *No complaints about access to services*

The survey asked a series of yes or no questions: “Please tell me if any of the following has ever happened at your MCP while you were receiving services:”

- Were you unable to get an appointment at a convenient time?
- Were you dropped from a program against your wishes?
- Were you refused services due to loss of insurance, such as Medicaid?
- Were you refused services due to an outstanding bill?

An average of 75.5% of those surveyed answered “no” to all four questions, and the lowest provider rating fell 7.5%, while the highest rose 6.2%.

## *Overall access was excellent*

After the last four questions were asked, the survey asked the consumer: “Overall, would you say your access to services was: excellent, good, fair, poor?” (41.6% said excellent.) Here too, the lowest provider rating worsened, by 7.4%.

Access	Minimum	Maximum
Time to first appointment was about right	66.7%	92.2%
No complaints about access	57.9%	88.0%
Overall access was excellent	20.0%	55.4%

## **Participation**

The Division of Mental Health believes that for behavioral health services to work, consumers must participate in their own service planning. The survey asks a series of questions that attempt to learn if consumers do participate to the fullest extent.

### *Received Adequate Description of Treatment*

Consumers were asked if they thought they received an adequate description of the treatment that was planned for them. Overall, 83.4% said "yes", up 3.2% from last year.

Participation	Minimum	Maximum
Received adequate description of treatment	69.6%	91.2%
Were able to participate in treatment planning	64.2%	91.2%
Could have changed type of treatment	62.3%	84.6%
Staff listened to your concerns	80.7%	98.2%
Treatment met your needs	75.5%	98.1%
Received type of help you needed	64.3%	85.5%

### *Were able to participate in treatment planning*

On another question, consumers were asked if they felt they were able to participate in their own treatment planning. Overall, 80.1% said that they did. This ranged from 64.2% to 91.2%.

### *Could have changed type of treatment*

The survey also asked consumers if they felt free to request a change in the type of treatment they were receiving. Overall, 76.7% said yes, ranging from 62.3% at the most restrictive provider to 84.6% at the least.

### *Staff listened to your concerns / treatment met your needs*

Consumers responded very positively about the staff that actually provided services. Overall, 87.8% said that the staff listened to their concerns about treatment, and 85.8% felt the staff tried to make the treatment program meet their needs. The highest rating for treatment meeting consumer need improved by 5.4% this year.

### *Received type of help you needed*

Finally, 75.4% said that they received the type of help that they needed, up 2.5% over last year. The lowest rating for a provider improved here by 6.7%

## **Rights**

### *A patient advocate was available/rights were explained*

Each consumer has a long list of rights guaranteed by federal law, state law, Division of Mental Health rules and regulations, and by the provider's own ethical requirements.

Almost all providers identify an individual as a patient advocate. (For more information on this, you should look at Report Cards Volume 3, Issues 1, 2, or 3.) From the survey, about half (48.0%) of people surveyed knew that a patient advocate was available, up 2.8% from last year.

A greater number, 78.4% overall, said that their rights were explained to them, 3.1% more than last year's average.

### *Confidentiality and privacy was protected*

A very important right is to privacy and confidentiality. Overall, 78.8% of the people felt that this was dealt with very well. This is down 3.8% from last year. Also, the minimum score a provider earned here fell by 14.1%.

Rights	Minimum	Maximum
A patient advocate was available	24.6%	62.1%
Rights were explained	67.3%	89.3%
Confidentiality and privacy was protected	60.0%	89.3%

## Satisfaction

It is important that people can get to services, that the services help, and that their rights are protected. It is also important the overall experience is at least not unpleasant. Several questions assess consumer satisfaction.

Satisfaction	Minimum	Maximum
No staff were rude	72.5%	98.2%
Excellent treatment by personnel	28.0%	69.6%
Staff were approachable and friendly	86.8%	98.2%
Family was treated with respect	93.0%	100.0%
Environment was pleasant	88.0%	100.0%
I would go back if necessary	60.0%	85.7%
Would recommend services to a friend	72.7%	91.1%

### *No staff were rude /Excellent treatment by personnel*

This year a series of questions were asked together. Did any of the following bad things ever happen to you?

- Were you treated rudely by the billing department?
- Were you treated rudely by a counselor or case manager?
- Were you treated rudely by the secretarial staff?
- Overall, would you say the way you were treated by personnel was excellent, good, fair, or poor?

On average, 89.2% of the people were not treated rudely by billing, clerical, or clinical staff. However, only 51.8% of the people overall said that they received excellent service. The minimum scores providers received for these questions fell by 10.8% and 9.1%, respectively, however.

When asked more general questions about staff, 94.2% said staff were approachable and friendly,

96.5% said that their family was treated with respect, and 96.6% said that the environment was pleasant. On the latter two questions respectively, one provider and seven providers received positive comments by everybody asked.

### *Would you go back if necessary?*

A very common question is to ask consumers, "If you or a family member were to need additional treatment, would you return to the same provider?" The average score was 75.2%, with the minimum average score at 60.0%, down 6.1% from last year.

### *Would you recommend this provider to a friend?*

Another common question asked is, "Would you recommend this provider to a friend?". The "yes" responses ranged from 72.7% to 91.1%, 80.5% overall. Here, the average was 4.9% below last year's average response.

## Impact of Services

Why would somebody receive services unless they thought they would work? We need to know if the services have an impact on people's lives.

### *Counselor assessed correctly*

Eighty-one percent (81.6%) of the consumers reported that their counselor assessed their problems competently. This ranges from 74.5% (up 8.4%) to 90.6%.

### *Counselor provided good treatment*

Consumers were then asked if their counselor did a competent job in treating them. The average score was 80.4% (up 2.3%), the maximum 90.9% (up 5.7%) and the minimum 72.4% (up 8.0%). This was the only question where all three statistics shows significant improvement.

### *Services made things better?*

We told consumers that we would like to know how much the services helped. They could

answer that they felt the services made things much better, somewhat better, made no difference, made things somewhat worse or much worse. This year, the proportion of consumers reporting that services "made things much better" ranged from 20.0% to 43.9% while the average, 31.7%, basically did not change.

### ***Services improved school performance***

Consumers were asked if, as a result of the services they received, they were more, the same, or less satisfied with the child's performance in school. While the average score of 47.6% was not much changed from last year, both the maximum and minimum scores fell, by 6.7% and 6.6% respectively.

### ***Services improved important relationships***

Consumers were then asked if, as a result of the services they received, they were more, the same, or less satisfied with their important personal relationships. The proportion of consumers reporting that important personal relationships have improved were 36.0% at a minimum to 61.0% for the maximum, 5.8% higher than last year.

<b>Impact</b>	<b>Minimum</b>	<b>Maximum</b>
Counselor assessed competently	74.5%	90.6%
Counselor treated competently	72.4%	90.9%
Services made things better	20.0%	43.9%
Services improved school performance	30.4%	57.9%
Services improved important relationships	36.0%	61.0%
Services improved housing satisfaction	32.1%	61.8%
Physical health improved	42.3%	66.1%

### ***Services improved housing satisfaction***

Consumers were asked if, as a result of the services they received, they were more, the same, or less satisfied with their living arrangements. Providers received very similar scores to last year, with an average of 50.5%, but the minimum rating fell by 8.4% from last year.

### ***Physical health improved***

There is a widespread belief that improving a person's mental health also improves their physical health. Three sets of questions on the survey related to this belief. People were asked to remember how many days they spent in the hospital, trips they made to the emergency room, and visits they made to a doctor, all for physical health reasons, in the year before they were in treatment. They were then asked the same questions for the most recent year. The medical offset questions are the proportions of people who used less of these physical health services in the most recent year.

Overall, 56.3% of the providers received a positive score on this item, up 2.3% from last year.



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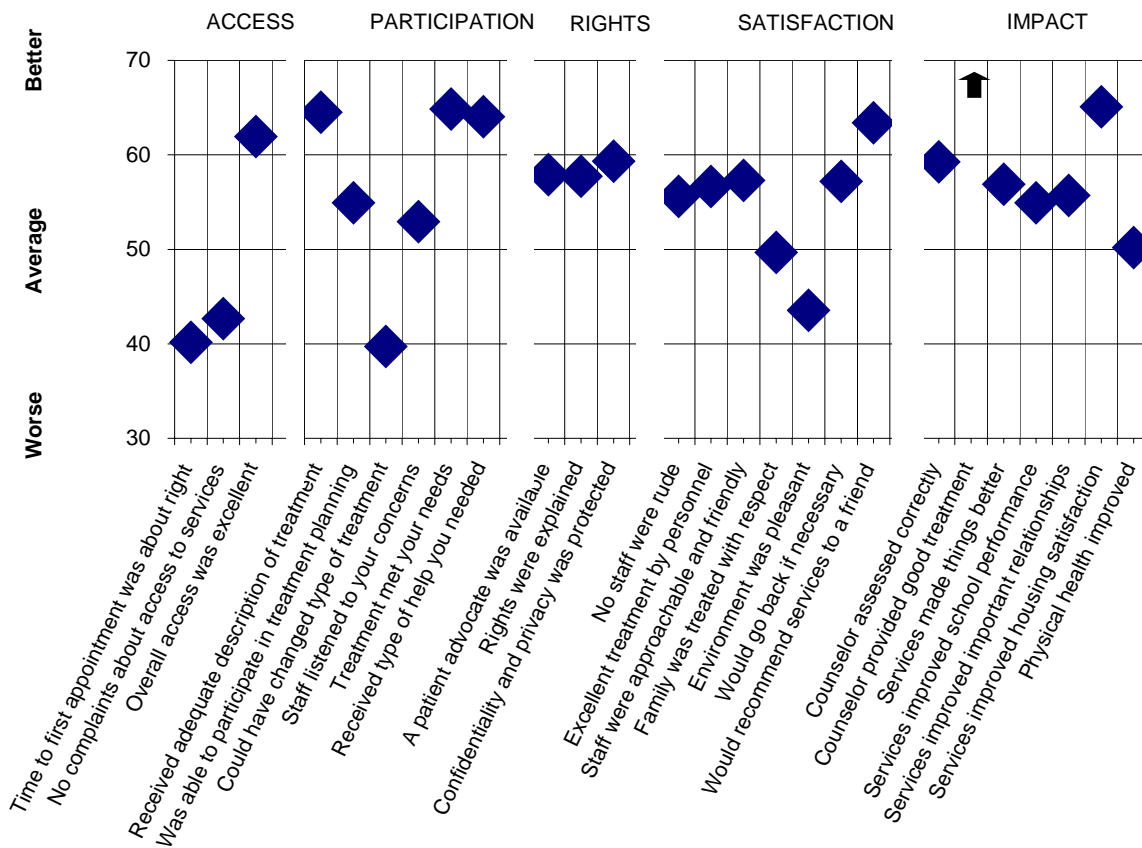
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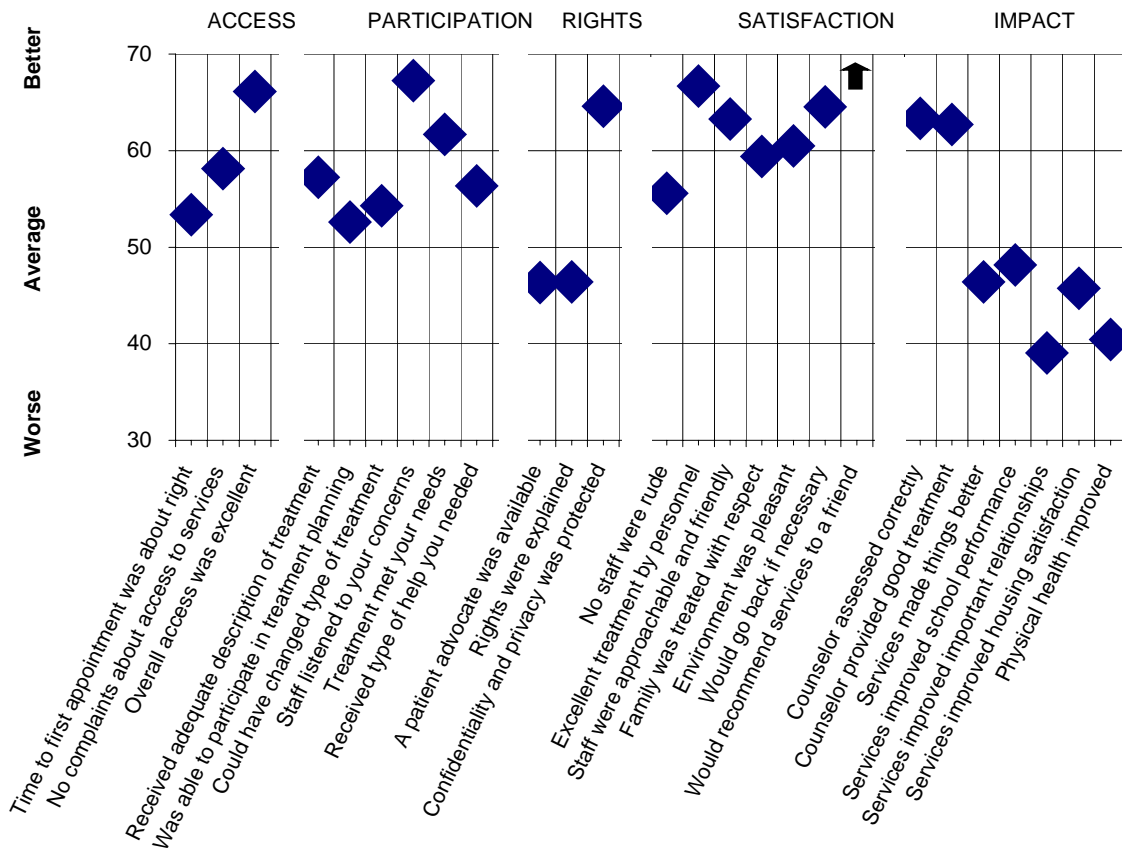
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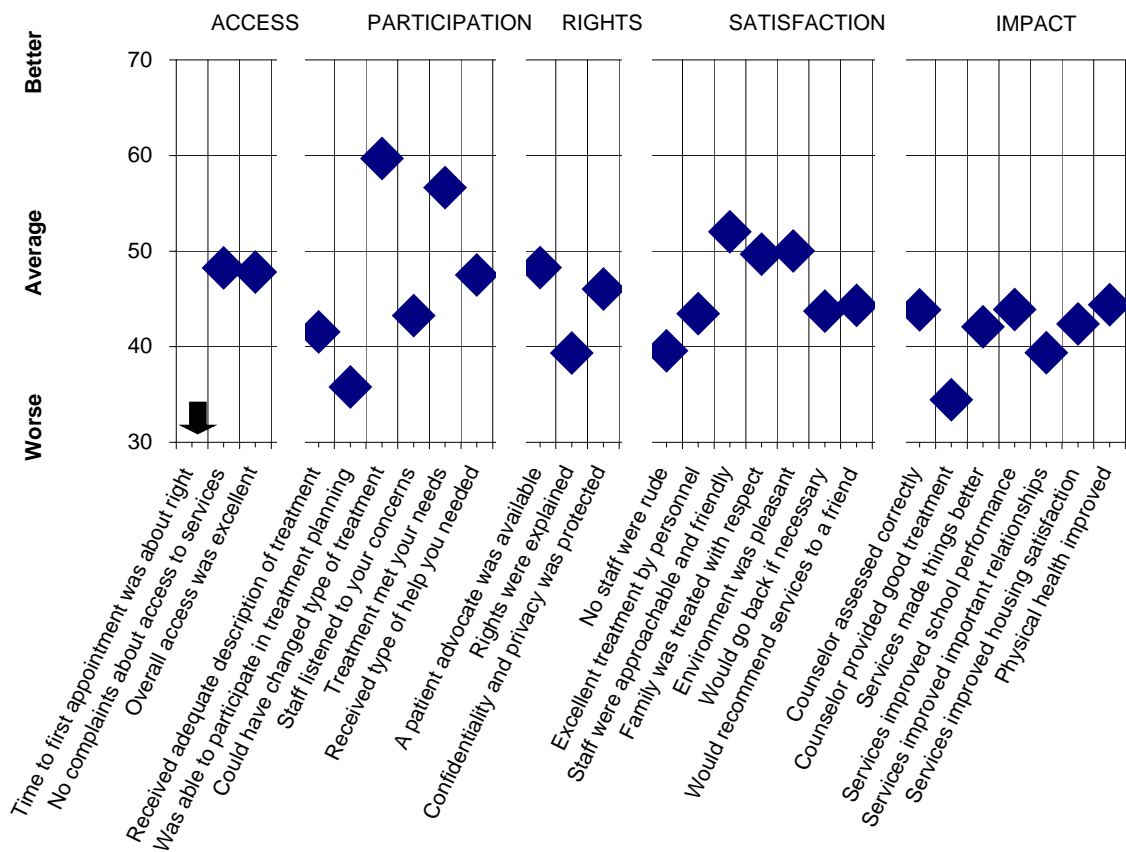
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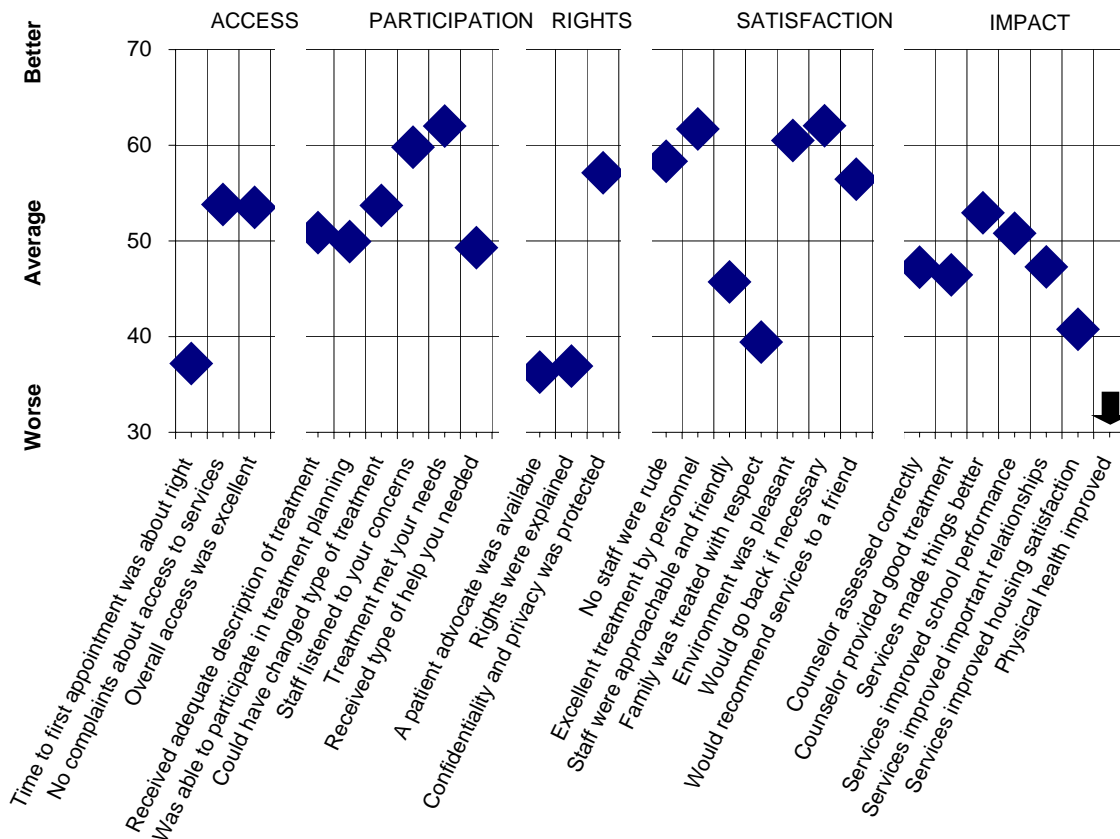
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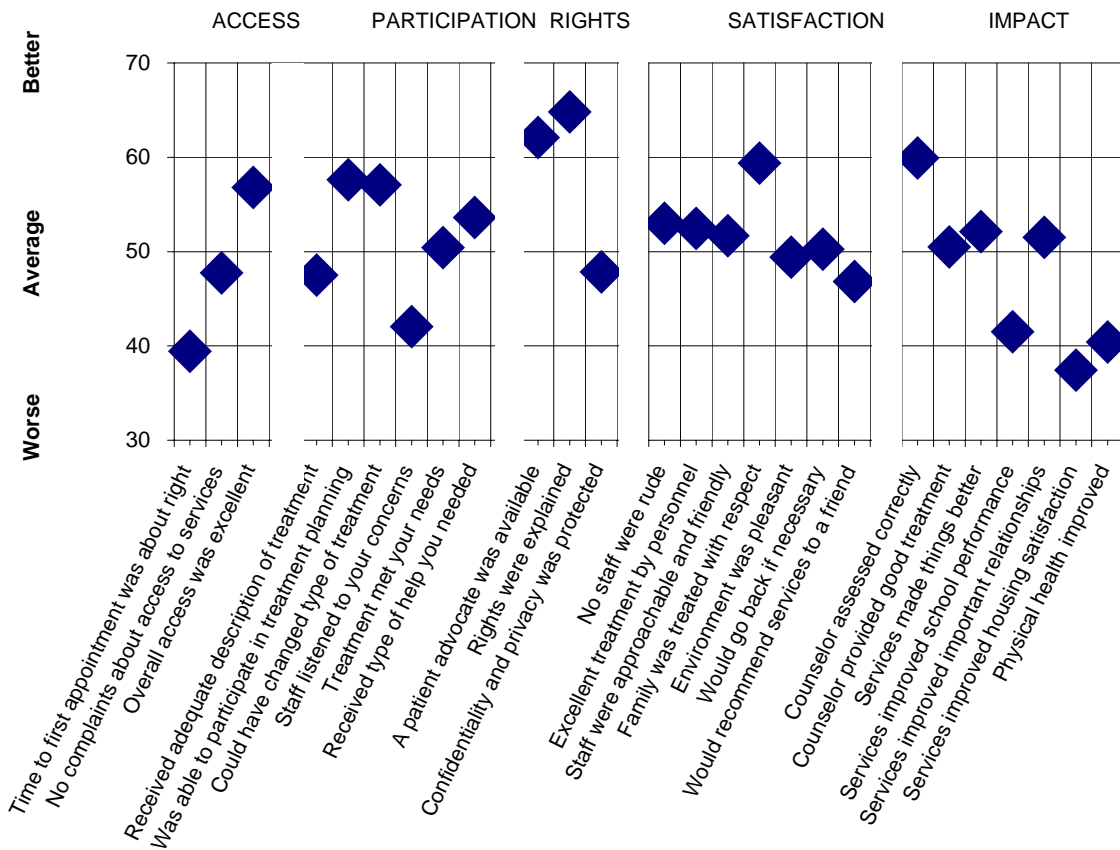
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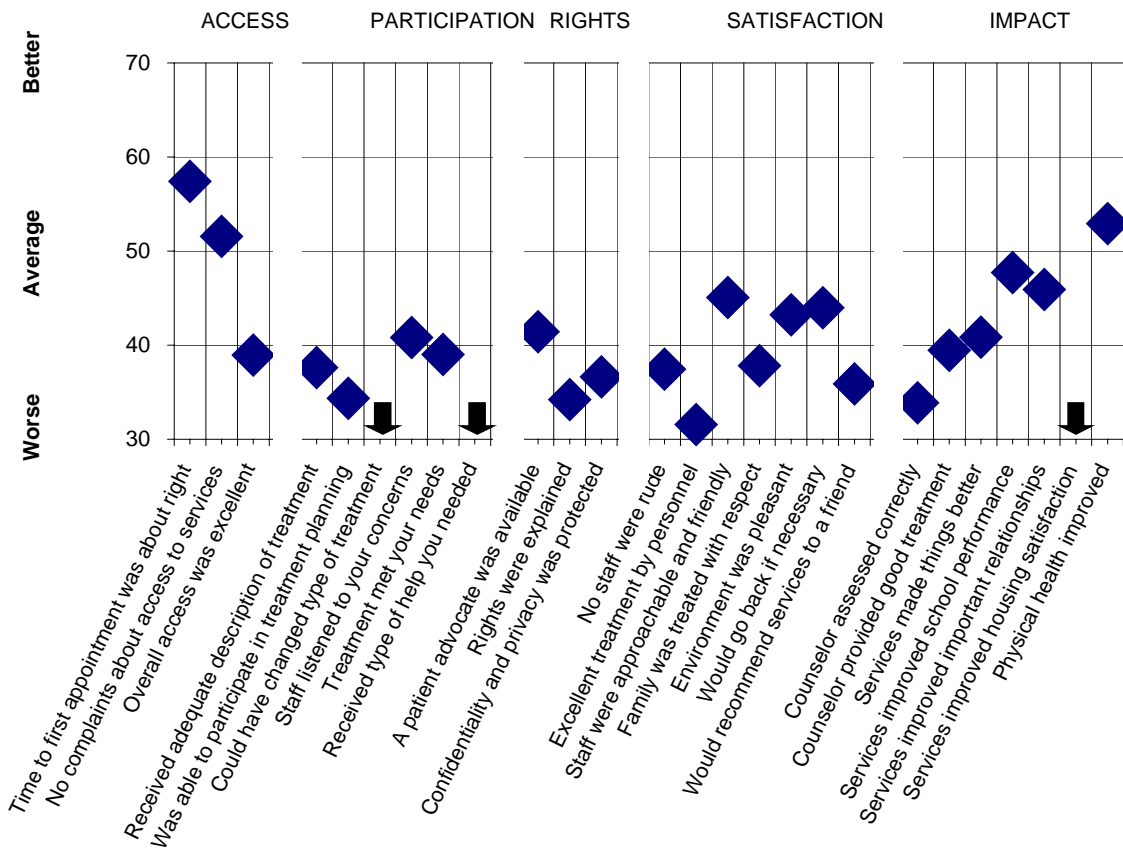
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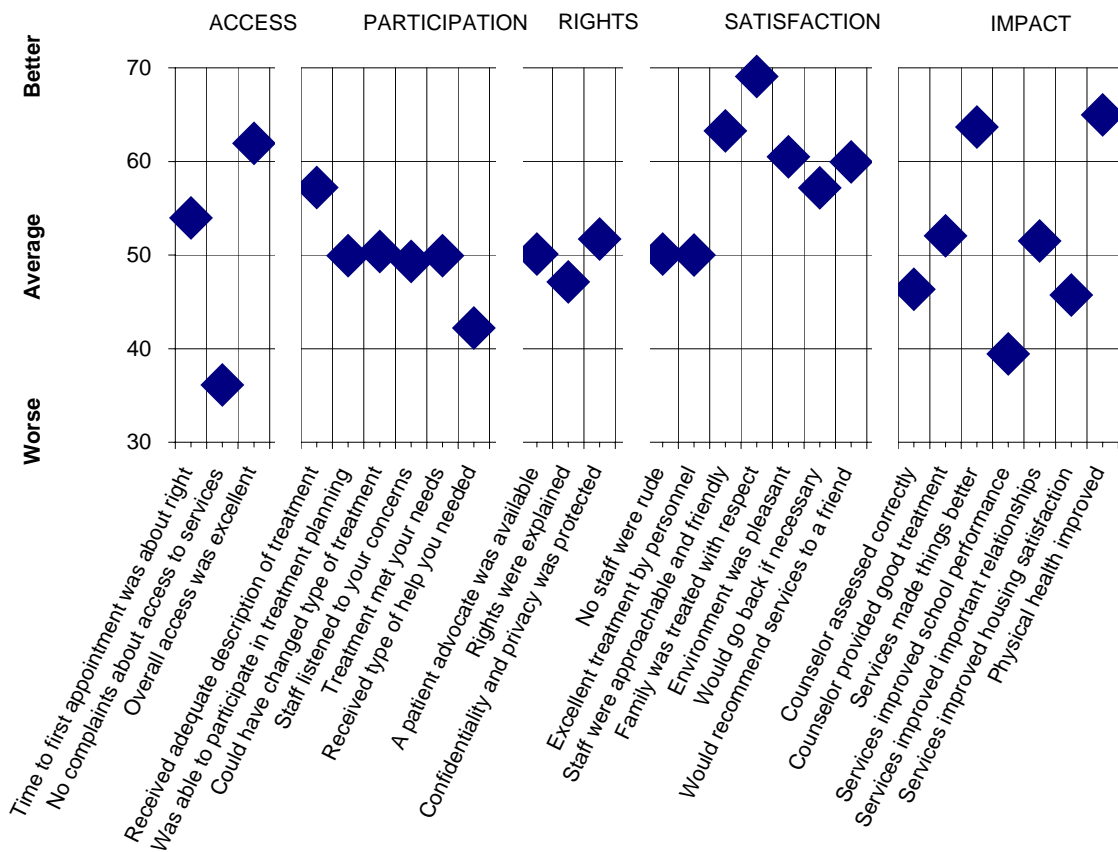
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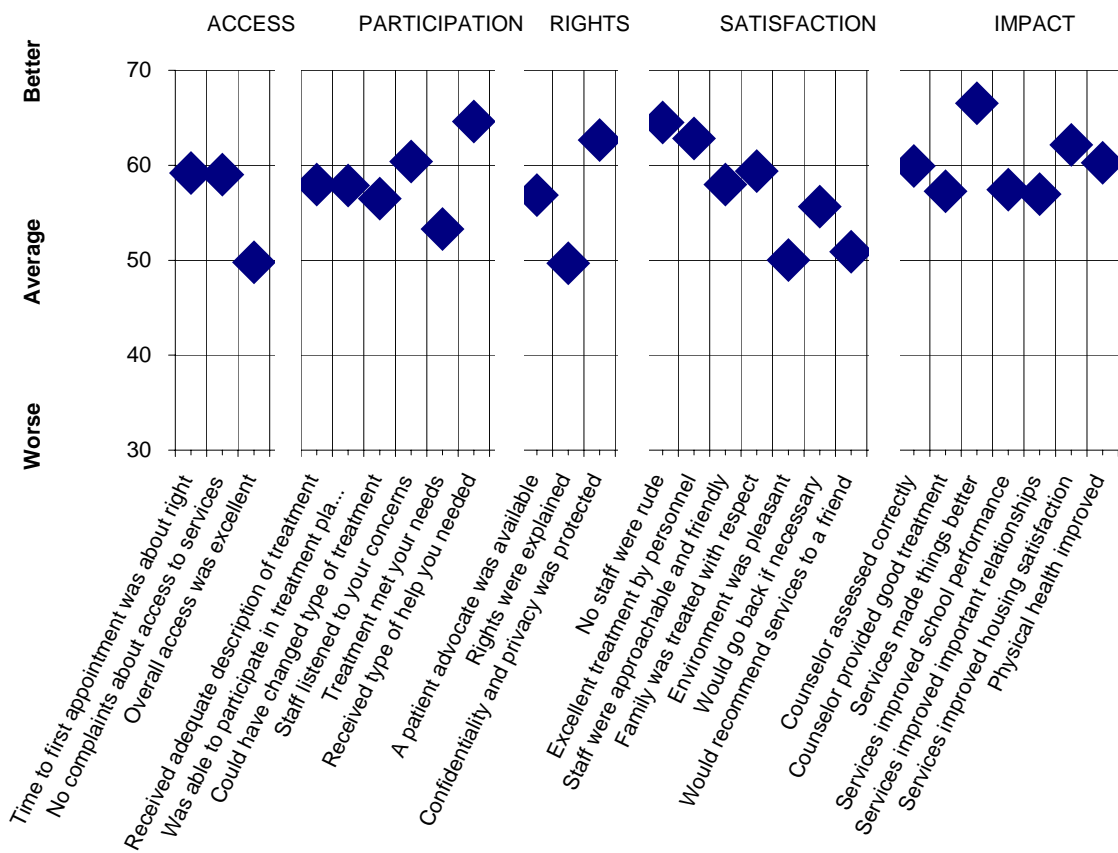
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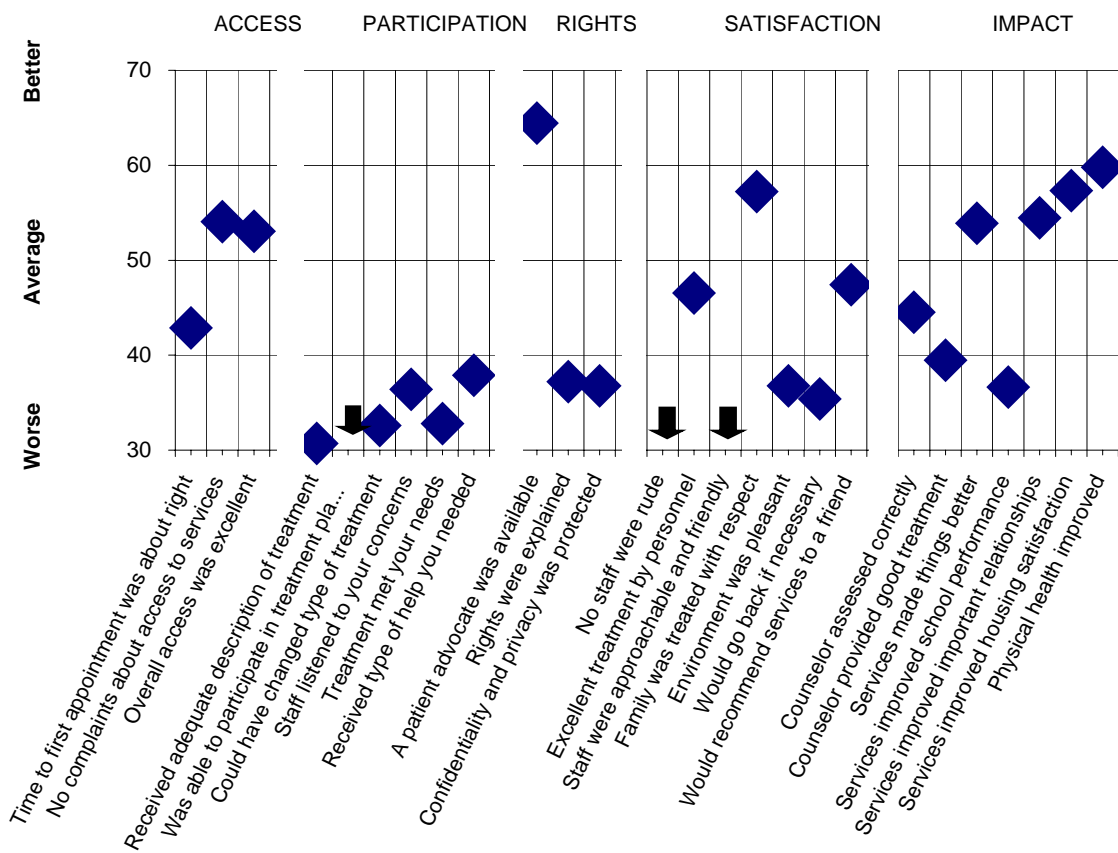
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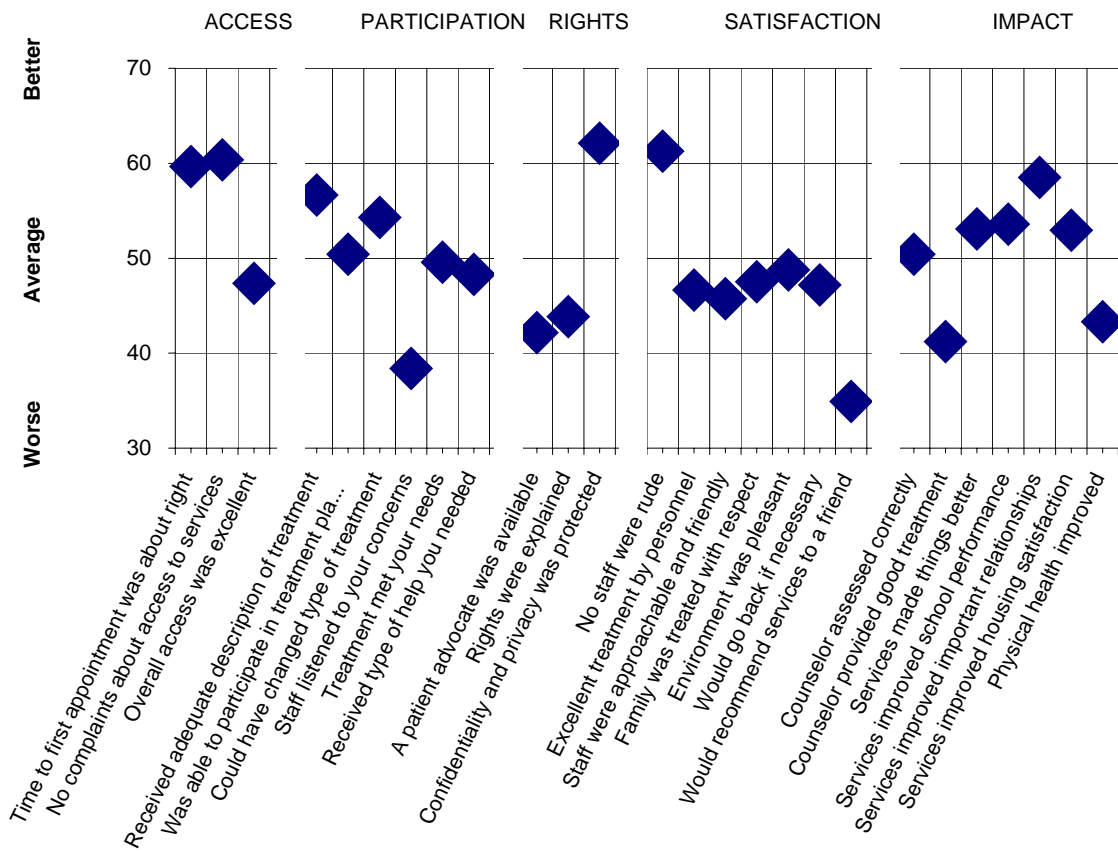
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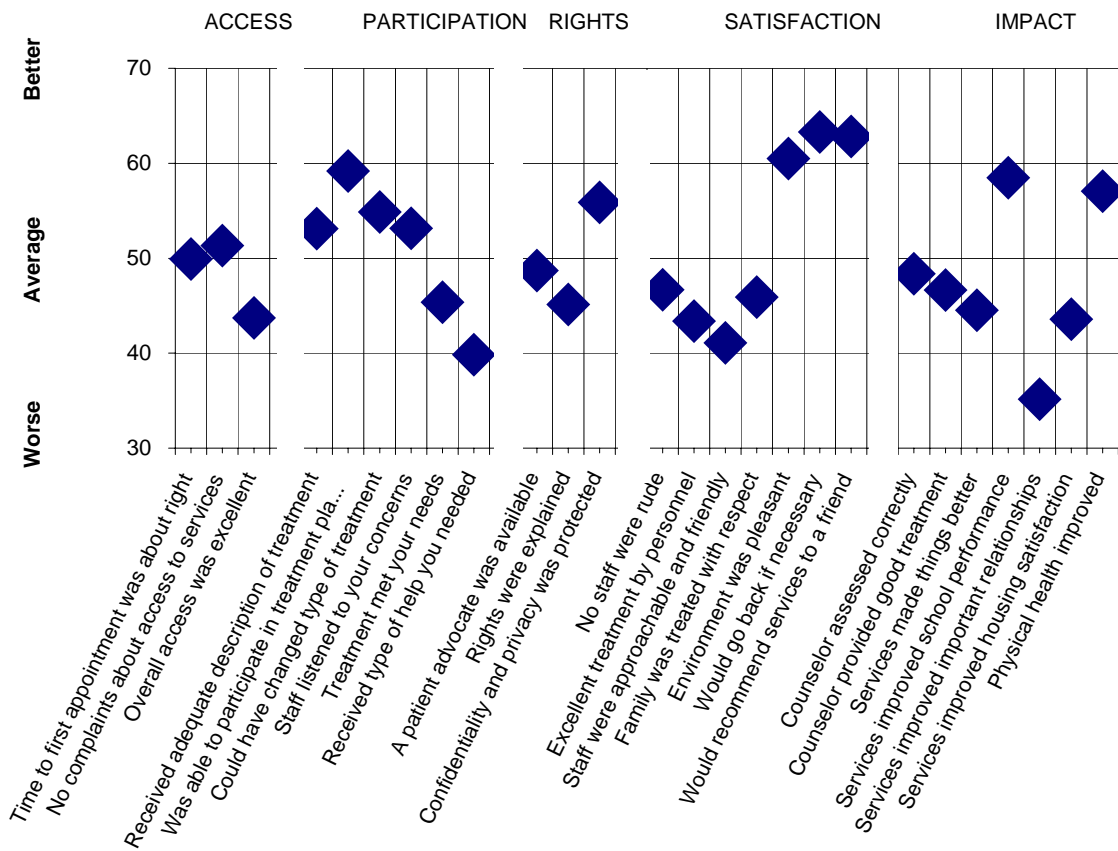
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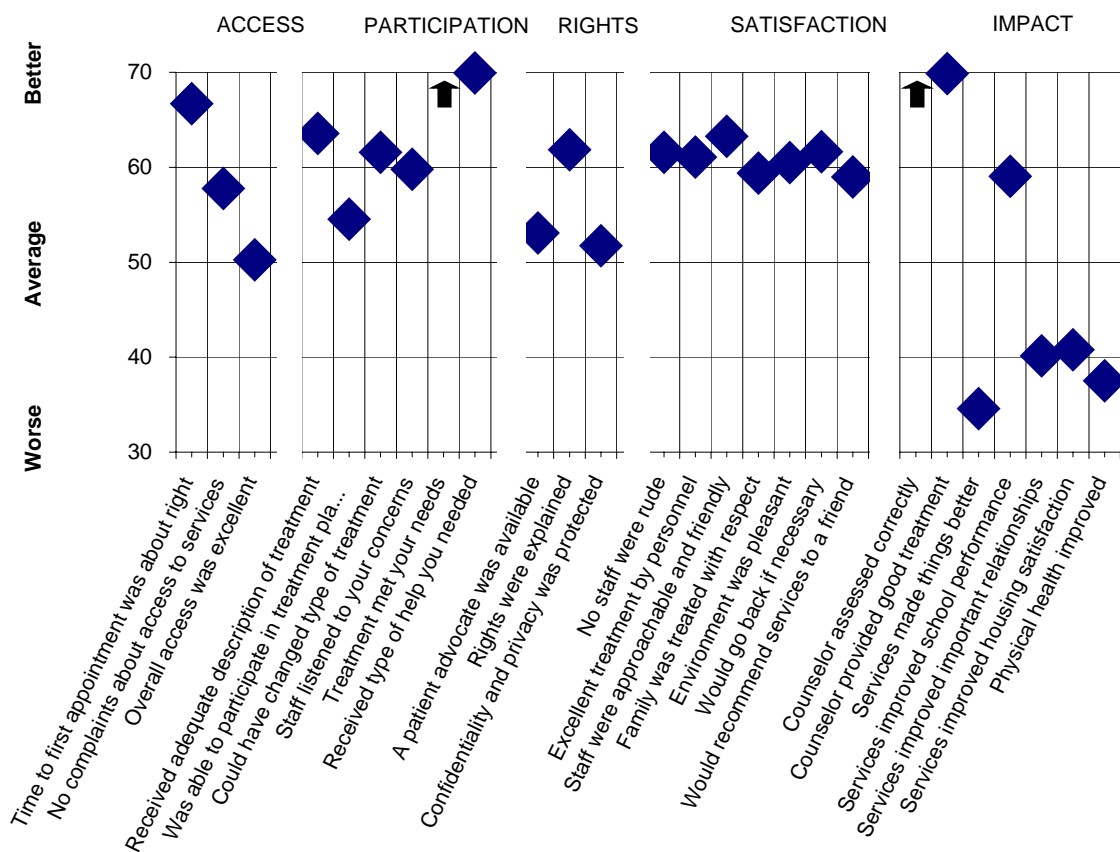
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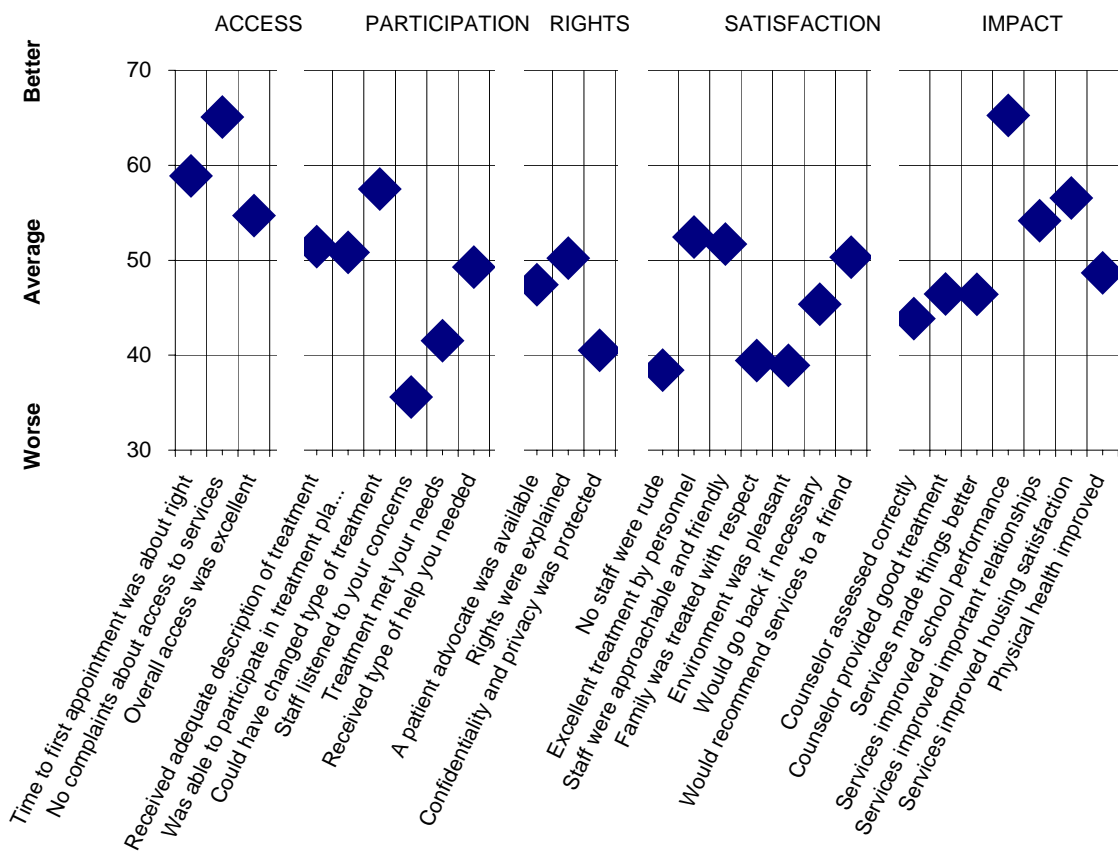
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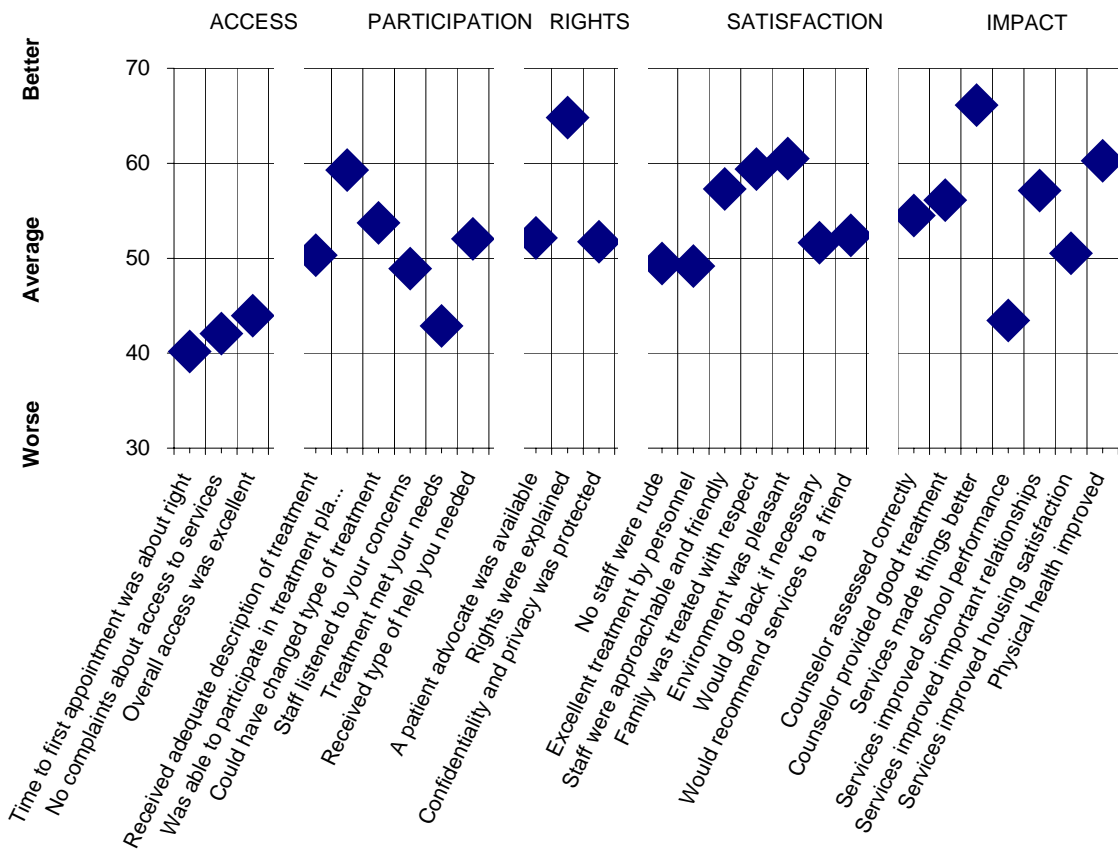
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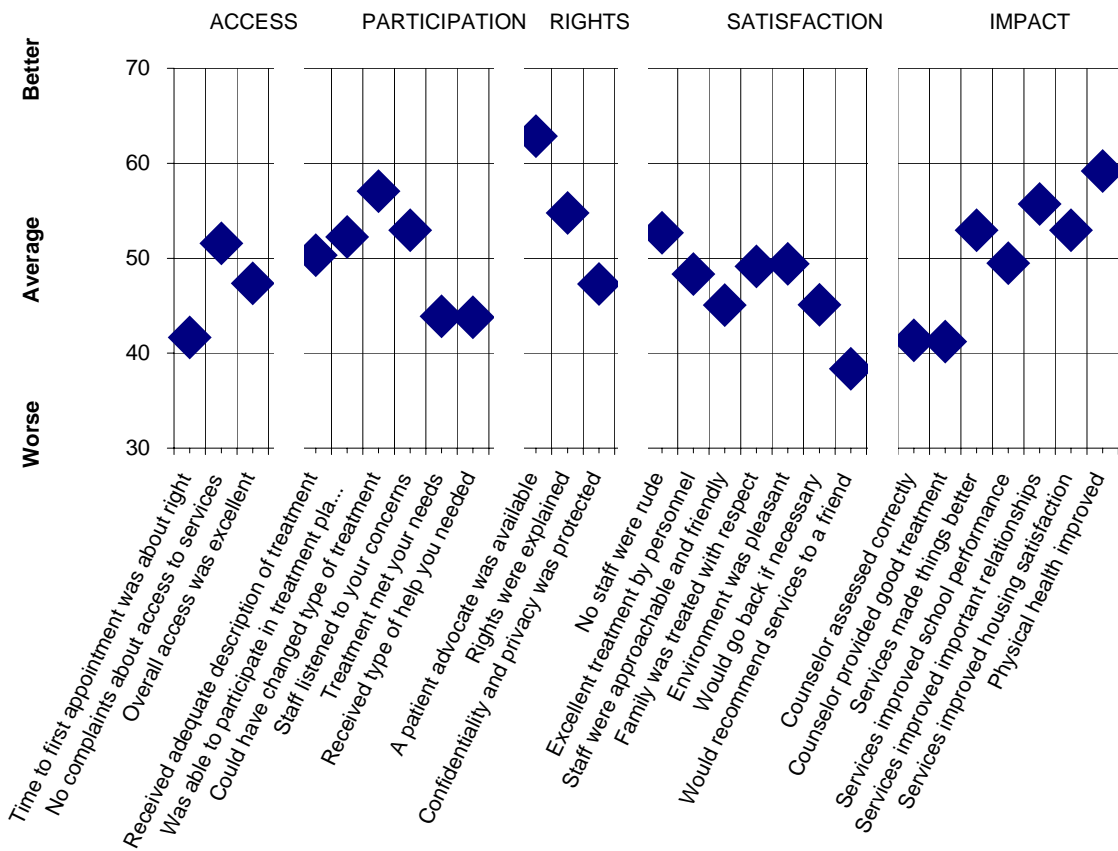
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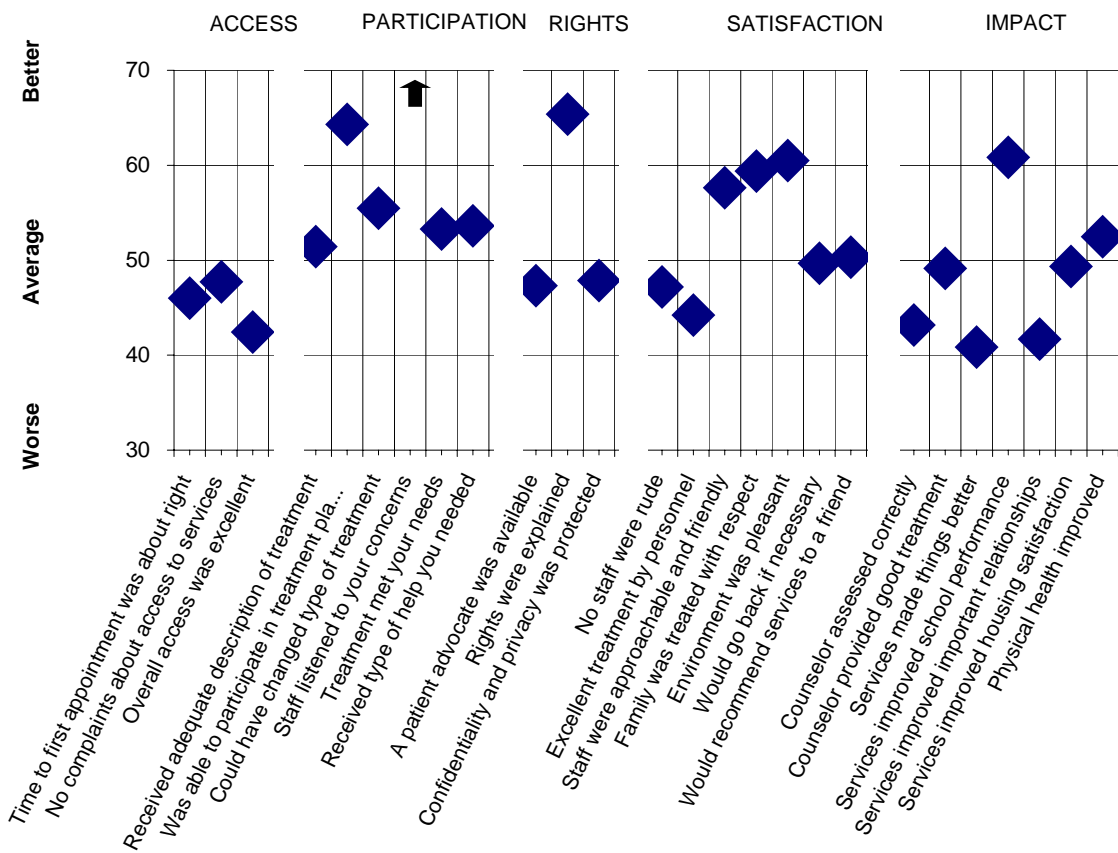
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## CEO

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CEO  
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## Consumer Contact

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# BehaviorCorp

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## CEO

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Executive Director

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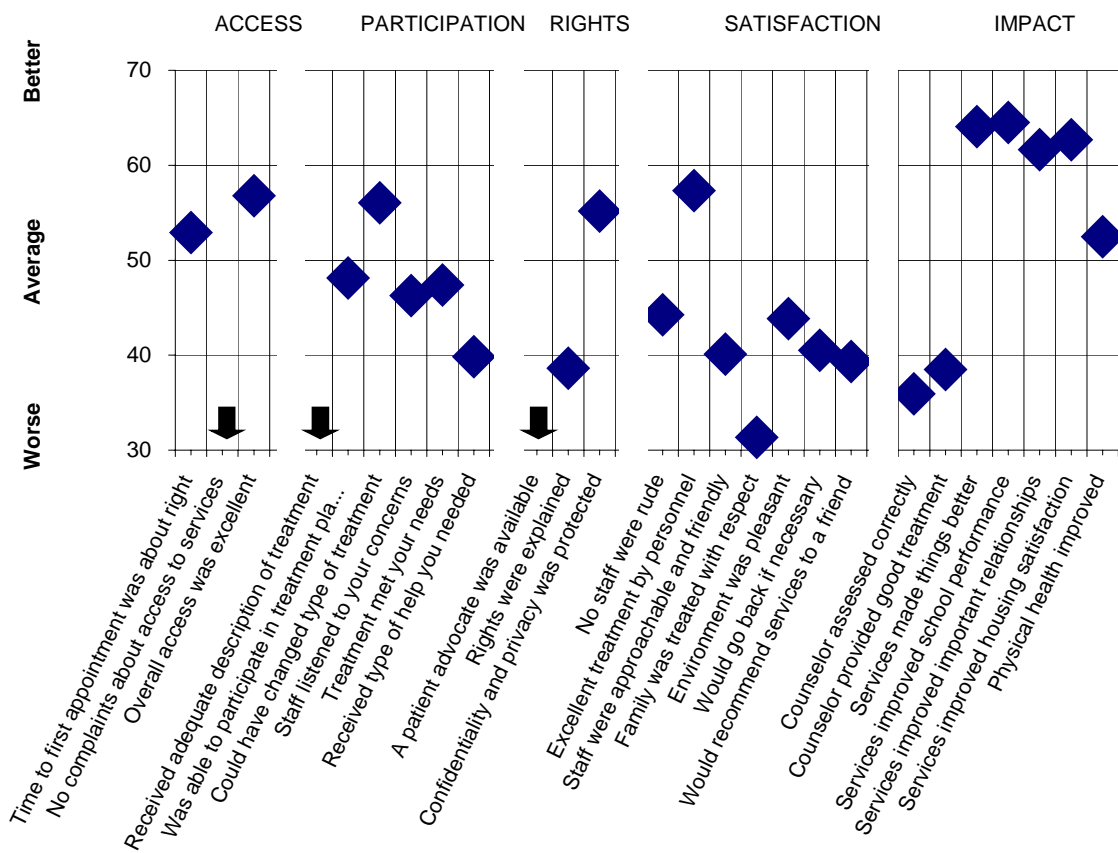
## Consumer Contact

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Assoc Dir., Clinical Programs

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[jdavis@behaviorcorp.org](mailto:jdavis@behaviorcorp.org)



# Addiction Resource Network of Indiana, Inc. (ARNI)

(996)

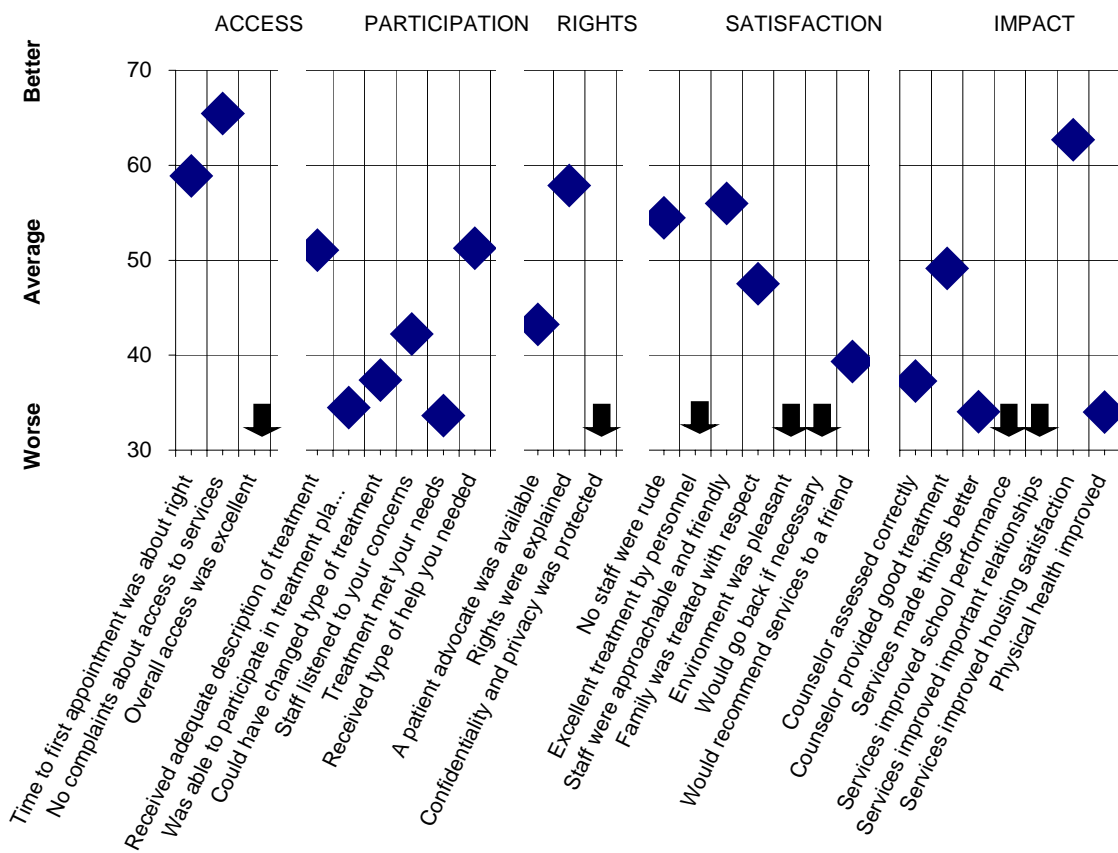
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## CEO

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# Affiliated Service Providers of Indiana, Inc. (ASPIN)

(998)

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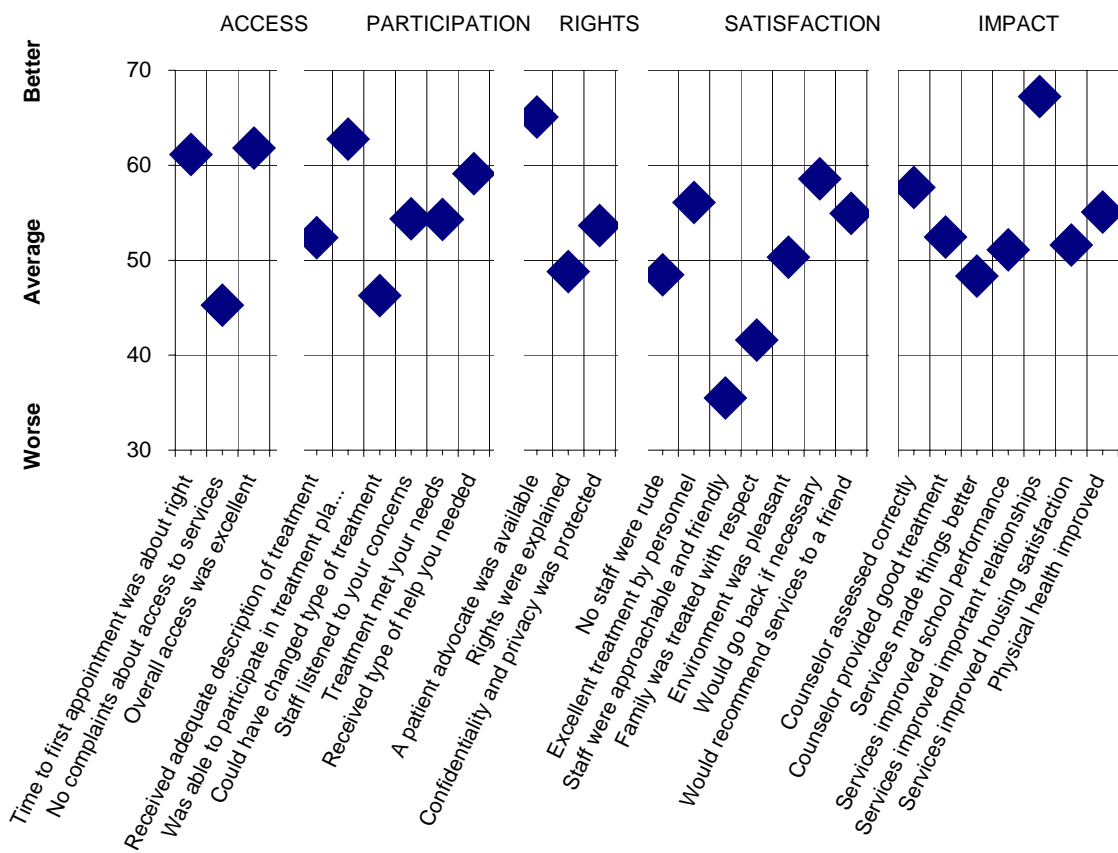
## CEO

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Executive Director/CEO

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## Consumer Contact



# Southlake/Tri-City Management Corp. (Community Behavioral Health Network)

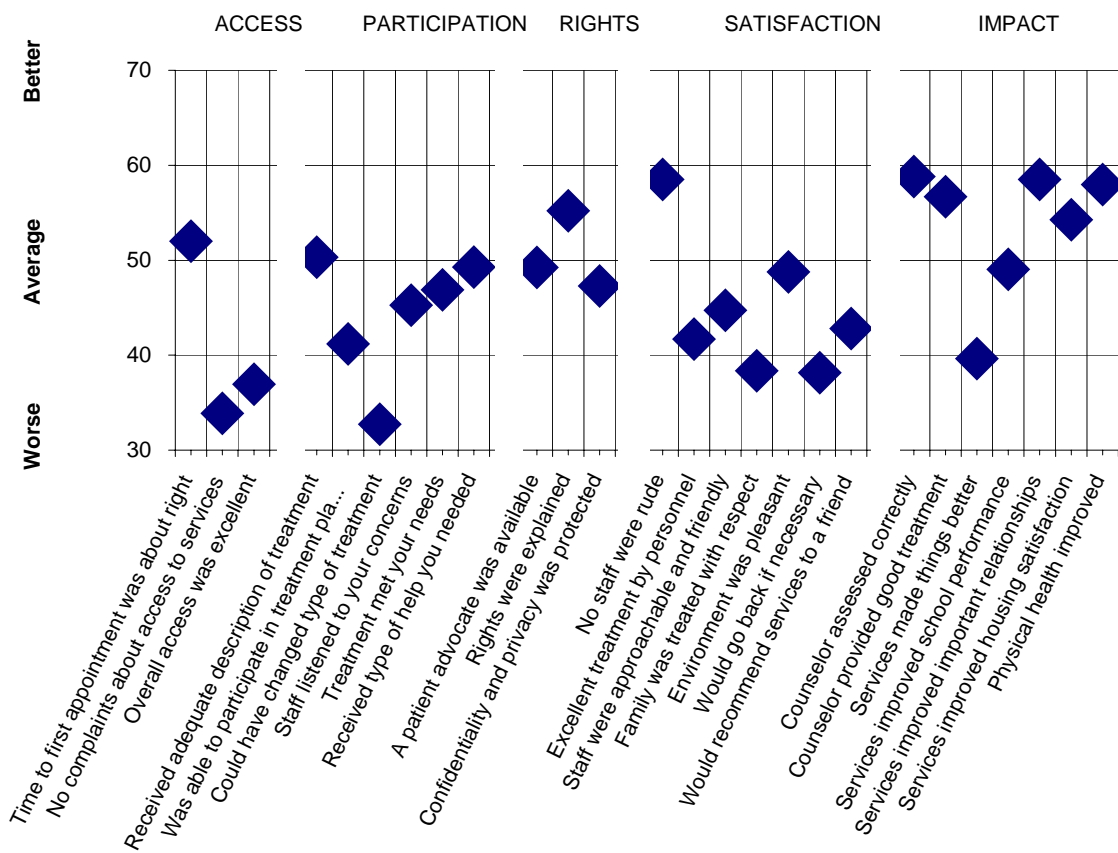
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## CEO

Kathryn D. Whittington, Ph.D.  
President  
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## Consumer Contact

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## Glossary of Terms

**Chronic Addiction Disorder:** The Division of Mental Health definition of chronic addiction disorder is as follows:

- 1.) The individual has a substance-related disorder diagnosed under the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> edition (DSM-IV), published by the American Psychiatric Association.
- 2.) The individual experiences significant functional impairments in two (2) of the following areas:
  - a.) Activities of daily living.
  - b.) Interpersonal functioning.
  - c.) Ability to live without recurrent use of chemicals.
  - d.) Psychological functions.
- 3.) The duration of the addiction has been in excess of twelve (12) months. However, individuals who have experienced amnesic episodes (blackouts), or have experienced convulsions or other serious medical consequences of withdrawal from a chemical abuse, or who display significant dangerous as a results of chemical use, do not have to meet the durational requirements.

**Consumer:** A person who receives mental health or addiction services.

**Continuum of Care:** A core set of mental health services that Managed Care Providers, who are contracting with the Division of Mental Health, must offer to consumers. These services include the following:

- 1.) Individualized treatment planning to increase coping skills and symptom management, which may include any combination of services listed below.
- 2.) Twenty-four hour a day crisis intervention.
- 3.) Case management to fulfill individual consumer needs, including assertive case management when indicated.
- 4.) Outpatient services, including intensive outpatient services, substance abuse services, counseling, and treatment.
- 5.) Acute stabilization services including detoxification services.
- 6.) Residential services.
- 7.) Day treatment.

- 8.) Family support services.
- 9.) Medication evaluation and monitoring.
- 10.) Services to prevent unnecessary and inappropriate treatment and hospitalization and the deprivation of a person's liberty.

**Division of Mental Health (DMH):** The state agency that regulates and certifies mental health services in Indiana.

**Hoosier Assurance Plan (HAP):** The Division of Mental Health managed care strategy designed to reform the method of funding and the delivery of mental health and addiction services in Indiana.

### **Hoosier Assurance Plan Assessment**

**Instruments:** The assessment tools used by all Managed Care Providers to determine the eligibility of consumers who receive mental health services under the Hoosier Assurance Plan. The assessments are done yearly. The assessment for adults is known as the Hoosier Assurance Plan Instrument for Adults (HAP-I) and the assessment tool for children is known as the Child and Adolescent Functional Assessment Scale (CAFAS): Miniscale.

### **K.E.Y. (Knowledge Empowers You)**

**Consumer Organization:** A consumer organization in Indiana whose mission is to educate consumers on their rights and assist consumers in asserting their rights.

**Managed Care:** Various strategies that seek to get the best services by controlling the services' utilization, promoting their quality, and measuring performance to ensure effectiveness.

**Managed Care Provider (MCP):** Twenty-one mental health service providers who are eligible for Hoosier Assurance Plan managed care funding. All these providers must agree to offer the full continuum of care. The Division of Mental Health must approve and certify the MCP. All MCPs are represented in these report cards.

**Outcomes:** A form of measuring consumer experience designed to help consumers, payer, and providers make rational health care-related

choices based on better insight into the effect of these choices on the consumer's life.

**Serious Emotional Disturbance (Children):**

The Division of Mental Health definition of serious emotional disturbance is as follows:

- 1.) The child has a mental illness diagnosis under the DSM-IV, published by the American Psychiatric Association.
- 2.) The child experiences significant functional impairments in at least one (1) of the following areas:
  - a.) Activities of daily living.
  - b.) Interpersonal functioning.
  - c.) Concentration, persistence, and pace.
  - d.) Adaptation to change.
- 3.) The duration of the disorder has been, or is expected to be, in excess of twelve (12) months. However, children who have experienced a situational trauma, and who are receiving services in two (2) or more community agencies, do not have to meet the durational requirement of this clause.

**Seriously Mentally Ill (Adult):** The Division of Mental Health definition of seriously mentally ill adult is as follows:

- 1.) The individual has a mental illness diagnosis under the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> edition (DSM IV),

published by the American Psychiatric Association.

- 2.) The individual experiences significant functional impairment in two (2) of the following areas:
  - a.) Activities of daily living.
  - b.) Interpersonal functioning.
  - c.) Concentration, persistence, and pace.
  - d.) Adaptation to change.
- 3.) The duration of the mental illness has been, or is expected to be, in excess of twelve (12) months. However, adults who have experienced a situational trauma so not have to meet the durational requirement of this clause.

**S.H.A.P.E.:** Acronym for Serving the Hoosier Assurance Plan through Education, a new initiative of the Indiana Family and Social Services Administration - Division of Mental Health to make HAP information more accessible to Hoosiers. [Accessible through a web site ([http://www.in.gov/fssa/shape/shape\\_home.html](http://www.in.gov/fssa/shape/shape_home.html)) and toll-free hotline (1-800-813-6511)]

**Staff Turnover:** The rate at which staff remain employed at a place of employment. High staff turnover means staff come and go frequently. Low staff turnover means staff work at their place of employment for a relatively long time.

## Data Tables

These pages include tables that provides background information data that is graphed on the provider pages. There is one table for each of the summary areas, and one column for each question.

<b>Access</b>			
Provider	Time to first appointment was about right	No complaints about access to services	Overall access was excellent
401	74.5%	69.6%	51.8%
402	83.3%	82.1%	55.4%
403	66.7%	74.1%	39.7%
404	72.5%	78.6%	44.6%
405	74.0%	73.7%	47.4%
406	86.0%	76.8%	32.1%
408	83.7%	64.3%	51.8%
409	87.2%	82.8%	41.4%
413	76.3%	78.8%	44.2%
414	87.5%	83.9%	39.3%
416	81.0%	76.6%	36.2%
420	92.2%	81.8%	41.8%
422	87.0%	87.7%	45.6%
425	74.5%	69.1%	36.4%
426	75.5%	76.8%	39.3%
428	78.4%	73.7%	35.1%
430	83.0%	57.9%	47.4%
996	87.0%	88.0%	20.0%
998	88.5%	71.7%	51.7%
999	82.4%	62.5%	30.4%
Average	81.1%	75.5%	41.6%
Standard Deviation	6.7%	8.1%	8.6%
Maximum	92.2%	88.0%	55.4%
Minimum	66.7%	57.9%	20.0%

<b>Participation</b>						
Provider	Received adequate description of treatment	Was able to participate in treatment planning	Could have changed type of treatment	Staff listened to your concerns	Treatment met your needs	Received type of help you needed
401	91.2%	83.9%	69.6%	89.3%	94.6%	82.5%
402	87.3%	82.1%	79.6%	96.4%	92.7%	78.6%
403	78.9%	69.0%	83.3%	84.5%	89.7%	74.1%
404	83.9%	80.0%	79.2%	92.7%	92.9%	75.0%
405	82.1%	86.0%	81.5%	83.9%	86.0%	77.2%
406	76.8%	67.9%	62.3%	83.3%	79.2%	64.3%
408	87.3%	80.0%	76.9%	87.5%	85.7%	71.4%
409	87.7%	86.2%	81.1%	93.0%	87.7%	82.8%
413	73.1%	64.2%	64.7%	81.1%	75.5%	69.2%
414	87.0%	80.4%	79.6%	82.1%	85.5%	74.5%
416	85.1%	87.2%	80.0%	89.4%	83.0%	70.2%
420	90.7%	83.6%	84.6%	92.7%	98.1%	85.5%
422	84.2%	80.7%	81.8%	80.7%	80.7%	75.0%
425	83.6%	87.3%	79.2%	87.3%	81.5%	76.4%
426	83.6%	81.8%	81.5%	89.3%	82.1%	72.2%
428	84.2%	91.2%	80.4%	98.2%	87.7%	77.2%
430	69.6%	78.6%	80.8%	86.0%	84.2%	70.2%
996	84.0%	68.0%	68.0%	84.0%	76.0%	76.0%
998	84.7%	90.0%	74.1%	90.0%	88.3%	80.0%
999	83.6%	73.2%	64.8%	85.5%	83.9%	75.0%
Average	83.4%	80.1%	76.7%	87.8%	85.8%	75.4%
Standard Deviation	5.4%	7.8%	6.9%	5.0%	6.0%	5.1%
Maximum	91.2%	91.2%	84.6%	98.2%	98.1%	85.5%
Minimum	69.6%	64.2%	62.3%	80.7%	75.5%	64.3%



<b>Rights</b>			
Provider	A patient advocate was available	Rights were explained	Confidentiality and privacy was protected
401	55.4%	83.9%	85.5%
402	44.6%	75.9%	89.3%
403	46.4%	70.9%	75.9%
404	35.2%	69.2%	83.9%
405	59.3%	88.9%	77.2%
406	40.0%	67.3%	69.1%
408	48.1%	76.4%	80.0%
409	54.4%	78.2%	87.9%
413	61.5%	69.4%	69.2%
414	40.7%	74.1%	87.5%
416	46.8%	75.0%	83.0%
420	50.9%	86.8%	80.0%
422	45.6%	78.6%	71.9%
425	50.0%	88.9%	80.0%
426	60.0%	81.8%	76.8%
428	45.5%	89.3%	77.2%
430	24.6%	70.4%	82.5%
996	41.7%	84.0%	60.0%
998	62.1%	77.6%	81.4%
999	47.3%	82.1%	76.8%
Average	48.0%	78.4%	78.8%
Standard Deviation	9.3%	7.1%	7.2%
Maximum	62.1%	89.3%	89.3%
Minimum	24.6%	67.3%	60.0%

## Satisfaction

Provider	No staff were rude	Excellent treatment by personnel	Staff were approachable and friendly	Family was treated with respect	Environment was pleasant	Would go back if necessary	Would recommend services to a friend
401	92.7%	58.9%	96.4%	96.4%	94.5%	80.4%	87.5%
402	92.7%	69.6%	98.2%	98.2%	100.0%	85.7%	91.1%
403	82.8%	44.8%	94.8%	96.4%	96.6%	70.7%	77.6%
404	94.4%	64.3%	92.9%	94.5%	100.0%	83.9%	83.9%
405	91.1%	54.4%	94.7%	98.2%	96.4%	75.4%	78.9%
406	81.5%	32.1%	92.7%	94.2%	94.4%	70.9%	73.2%
408	89.3%	51.8%	98.2%	100.0%	100.0%	80.4%	85.7%
409	98.2%	65.5%	96.6%	98.2%	96.6%	79.3%	81.0%
413	72.5%	48.1%	86.8%	97.8%	92.3%	64.7%	79.2%
414	96.2%	48.2%	92.9%	96.0%	96.2%	73.2%	72.7%
416	87.2%	44.7%	91.5%	95.7%	100.0%	84.8%	87.2%
420	96.4%	63.6%	98.2%	98.2%	100.0%	83.6%	85.2%
422	82.1%	54.4%	94.7%	94.5%	93.0%	71.9%	80.7%
425	88.9%	50.9%	96.4%	98.2%	100.0%	76.4%	81.8%
426	90.9%	50.0%	92.7%	96.3%	96.4%	71.7%	74.5%
428	87.5%	45.6%	96.5%	98.2%	100.0%	75.0%	80.7%
430	85.7%	59.6%	91.2%	93.0%	94.6%	68.4%	75.0%
996	92.0%	28.0%	96.0%	96.0%	88.0%	60.0%	75.0%
998	88.3%	58.3%	89.8%	94.9%	96.7%	81.4%	83.1%
999	94.5%	42.9%	92.6%	94.3%	96.2%	66.7%	76.8%
Average	89.2%	51.8%	94.2%	96.5%	96.6%	75.2%	80.5%
Standard Deviation	6.2%	10.7%	3.0%	1.9%	3.2%	7.2%	5.2%
Maximum	98.2%	69.6%	98.2%	100.0%	100.0%	85.7%	91.1%
Minimum	72.5%	28.0%	86.8%	93.0%	88.0%	60.0%	72.7%

Impact							
Provider	Counselor assessed correctly	Counselor provided good treatment	Services made things better	Services improved school performance	Services improved important relationships	Services improved housing satisfaction	Physical health improved
401	85.7%	90.9%	36.8%	50.9%	53.6%	61.8%	56.4%
402	87.5%	87.0%	29.1%	46.3%	42.9%	47.3%	50.0%
403	78.9%	72.4%	25.9%	43.4%	43.1%	44.8%	52.6%
404	80.4%	78.6%	33.9%	48.1%	48.2%	43.6%	42.3%
405	86.0%	80.7%	33.3%	41.8%	50.9%	41.1%	50.0%
406	74.5%	75.0%	25.0%	46.0%	47.3%	32.1%	58.2%
408	80.0%	81.5%	41.8%	40.4%	50.9%	47.3%	66.1%
409	86.0%	84.2%	43.9%	52.6%	54.4%	59.6%	63.0%
413	79.2%	75.0%	34.6%	38.5%	52.8%	56.0%	62.7%
414	81.8%	75.9%	34.0%	50.0%	55.4%	52.7%	51.9%
416	80.9%	78.7%	27.7%	53.3%	40.4%	45.7%	60.9%
420	90.6%	90.7%	20.4%	53.7%	43.6%	43.6%	48.1%
422	78.9%	78.6%	29.1%	57.9%	52.6%	55.4%	55.4%
425	83.6%	83.6%	43.6%	43.1%	54.5%	50.9%	63.0%
426	77.8%	75.9%	33.9%	47.2%	53.6%	52.7%	62.3%
428	78.6%	80.0%	25.0%	54.9%	44.6%	50.0%	57.9%
430	75.4%	74.5%	42.1%	57.4%	57.4%	60.0%	57.9%
996	76.0%	80.0%	20.0%	30.4%	36.0%	60.0%	45.8%
998	85.0%	81.7%	30.5%	48.3%	61.0%	51.7%	59.6%
999	85.5%	83.9%	24.1%	46.9%	55.4%	53.7%	61.5%
Average	81.6%	80.4%	31.7%	47.6%	49.9%	50.5%	56.3%
Standard Deviation	4.4%	5.2%	7.4%	6.8%	6.4%	7.5%	6.6%
Maximum	90.6%	90.9%	43.9%	57.9%	61.0%	61.8%	66.1%
Minimum	74.5%	72.4%	20.0%	30.4%	36.0%	32.1%	42.3%